



SAC AND FOX NATION

Tribal School Clothing/School Supply Grant Application
920883 S. Highway 99
Stroud, Oklahoma 74079

Education: 918.968.3526 Ext. 2043

OFFICE USE ONLY

Received _____

____ TM ____ CDIB

Incomplete ☐

Initial _____

APPLICATION DUE BY SEPTEMBER 11th, 2015

Student Information

Please Print Clearly

*****PROVIDE A COPY OF C.D.I.B.*****

Application No.: _____ Application Date: _____

Student's Last Name _____ First Name _____ Middle _____

____/____/____
Social Security Number _____ Date of Birth _____ Sac and Fox Nation Roll # _____

PARENT/GUARDIAN INFORMATION:

Last Name _____ First Name _____ Middle _____

Address _____ City _____ State _____ ZIP _____

Phone No.: _____ Email Address.: _____

I REQUEST THE SCHOOL TO VERIFY ENROLLMENT AND/OR ATTENDANCE FOR THE ABOVE NAMED STUDENT.

Parent /Legal Guardian Signature _____ Date _____

Admissions Office

This section to be completed by school official

Student Name: _____ Grade: _____ School Year: 2015-2016

I certify the above student is currently enrolled and attending _____

Name of school

Address _____ Telephone No. _____

(School Stamp/Seal)

Signature of School Official: _____

Title: _____ Date: _____

*****Tribal Office Use Only*****

Date Approved: _____ Education Dept: _____

Statement of Acknowledgment

Applicant: Please read this carefully and sign below

I hereby certify that the information on this form is true and correct to the best of my knowledge. I declare that I will use any funds I receive from the Sac and Fox Nation School Clothing and/or School Supplies Grant solely for their intended purpose and solely for the benefit of the student named on this application. I understand that I must turn in all receipts or copies of the receipts from the purchases made with grant funds before the deadline in March, 2016. I also understand that misuse of the funds or failure to turn in the receipts may jeopardize the funding for all the children of that parent or guardian.

Signature_____

Date_____